10/510207

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2004

Application or Docket Number

NL 0 20 280

CLAIMS AS FILED - PART I									SMALL EN	ITITY		OTHER	
			(Column 1)			(Cotumn 2)			TYPE		OR	SMALL E	NTITY
TOTAL CLAIMS								RATE	FEE		RATE	FEE	
FOR			NUMBER FILED			NUMBER EXTRA			BASIC FEE		OR	BASIC FEE	750
TOTAL CHARGEABLE CLAIMS			minus 20		us 20 =				X \$ 9 =		OR	X \$ 18 =	
INDEPENDENT CLAIMS			minus 3 =			•			X \$ 44 =		OR	X \$ 88 =	
MULTIPLE DEPENDENT CLAIM PF				RESENT					+ \$ 150 =		OR	+ \$ 300 =	
* If the difference in column 1 is less than zero, enter "0" in column 2							column 2	•	TOTAL		OR	TOTAL	220
CLAIMS AS				ENDED					SMALL ENTITY		OR	OTHER THAN	
	Konthale	(Column 1)				umn 2) HEST	(Column 3)	1		ADDI-			ADDI-
AMENDMENT A	10-6-04	REMAINING AFTER			PREV	MBER 10USLY D FOR	PRESENT EXTRA		RATE	TIONAL FEE	i,	RATE	TIONAL FEE
	Total	- //	Minu	13	49	70	=		X \$ 9 =		OR	X \$ 18 =	
	Independent	• /	Minu	ıs	***	3	=	1	X \$ 44 =		OR	X \$ 88 =	
\$		INTATION OF I	NULT	IPLE DEP	ENDEN	IT CLAIM			+ \$ 150 =		OR	+ \$ 300 =	
									POTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
. (Column 1) (Column 2) (Column 3)											,		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT			PRE	SHEST IMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	AMENDMENT	Min	us	••		=	1	X \$ 9 =		OR	X \$ 18 =	
	Independent	•	Min	us	•••	•	=	1	X \$ 44 =		OR	X \$ 88 =	
	FIRST PRESE	NTATION OF	MULTIPLE DEPENDEN			NT CLAIN	^ <u> </u>	1	+ \$ 150 :	=	OR		
一		·	_					-	TOTAL ADDIT. FE	E	OR	ADDIT. FEE	
		(Column 1)			(Co	lumn 2)	(Column 3)	_			-		T
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT			PRE	GHEST UMBER VIOUSLY UD FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total ·	+	Mir	ius	••		=	1	X\$9=		OF	X \$ 18 =	
	Independent	•	Mir	nus	•••		=		X \$ 44 :	=	OF	X \$ 88 =	
	FIRST PRESENTATION OF MULTIPLE DE				PENDE	NT CLAI	м 🔲]	+ \$ 150		OF	L	-
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										ADDIT. FE	E		
	If the "Highest h	olumn 1 is less tha Number Previous) Number Previous) Number Previous)	Paid	For IN THE	S SPACE	: (S less Uni	en 20, enter 20 en 3' enter 3".		in the approp	iale box in co	lumn 1.		
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FORM PTO-875 (Rev. 11/2004)

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